

University of North Texas
Department of Sociology and Applied Gerontology
Course Syllabus

AGER 4550.900 CRN 30949
Long-Term Care Case Management with Older Adults

FACULTY INFORMATION:

Faculty Name: K. Whisnant Turner, Ph.D.
Associate Professor of Applied Gerontology
Phone: 940-390-1619 (Cell)
Email: Keith.Turner@UNT.edu
Office: 302G Chilton Hall

Contacts

If you have any questions or concerns about the course, please email me or call me directly at 940-390-1619 and leave a voice mail message including the number where you can be reached.

I usually return calls the same business day that they are received, but please allow 24 hours for a return call. If for some reason you have not received a return call within a day, please send me an email message at Keith.Turner@UNT.edu; please leave a detailed message including your cell phone number. I routinely check my email and phone messages.

Short Bio: Dr. Turner is Associate Professor of Applied Gerontology at the University of North Texas. He received the Interdisciplinary Doctoral Degree from the University of Cincinnati in Geriatrics, Health Policy/Administration, and Urban Planning. His current research addresses developing and evaluating community level programs and services for the aged, disabled, and populations with special healthcare needs. He instructs undergraduate and graduate students in a variety of other professional practice courses including mediation, grant proposal writing, community needs assessment, program planning and evaluation. He directs field internship placement for undergraduate and graduate students in Applied Gerontology. Dr. Turner also provides volunteer leadership assistance to local community organizations including the Denton County Geriatric Services Workgroup, the North Central Texas Council of Governments Area Agency on Aging, the Denton County MH/MR Authority, and the Denton County Health Department.



For kicks, Dr. Turner conducts non-profit agency board leadership training and provides strategic planning technical assistance to non-profit agency boards of directors and designs dispute resolution systems and is a professionally trained mediator in interpersonal and organizational conflicts.

Course Information:

Course Dates: Summer July 11, 2011 – August 12, 2011

Course Location/Time: Internet Course

Course Catalogue Description: (From 2010-2011 Undergraduate Course Catalogue) 3 hours. This practitioner-oriented course focuses on the foundations of case/care management and the care management process as practiced with impaired elderly clients and their family caregivers. Topics include older client intake and assessment, establishing goals and a plan of care, coordinating and linking services and resources, and managing and monitoring care. Situations commonly encountered with at-risk elders are examined using protocols.

Required Text: Cathy Jo Cress. Handbook of Geriatric Care Management; Ontario: Jones and Bartlett. (2012) ISBN 978-0-7637-9026-4.

Reference Text: American Psychological Association. (2001). *Publication manual of the American Psychological Association (5th ed.)*. Washington DC.

Learning Outcomes:

This course exposes students to geriatric care management constructs. Included are details regarding referral processes, client needs assessment, care planning, care arranging, care coordination, and evaluation. Students gain general knowledge of geriatric assessment dynamics, clinical protocols and instrumentation, person-centered and client-directed care planning, and life care planning. Upon completion of the course, students should be able to link the role of the geriatric care manager to an understanding of the processes of aging and disease management with health care and supportive service systems.

Grading Criteria:

- (25 pts) **Participation:** Students must read all assigned materials, view instructor-selected videos linked to the assigned materials, and participate in discussions on the materials and videos as directed by instructor-posted discussion topics.
- (25 pts) **Short Quizzes:** Students will complete short quizzes based on special assigned readings.
- (50 pts) **Final Exam:** Students will complete a final examination (T/F and/or M/C) drawing upon assigned readings, the textbook, videos, and other course content

Grading Scale:

A 90-100 pts

B 80-89 pts

C 70-79 pts

D 60-69 pts

F ≤ 60 pts

WF Failure to attend class sessions.

Attendance Policy: (From 2010-2011 Undergraduate Course Catalogue) “Regular and punctual class attendance is expected. Although in general students are graded on intellectual effort and performance rather than attendance, absences may lower the student’s grade where class attendance and class participation are deemed essential by the faculty member. In those classes where attendance is considered part of the grade, the instructor should so inform students at the semester’s beginning by a written notice.” See *Enrollment* section of the 2010-2011 Undergraduate Course Catalogue for entire policy. However, this course is taught on the Internet. Attendance is viewed as participation in discussions on the Discussion Board. Students will be penalized in the grading system for lack of participation.

Academic Integrity: Cheating and plagiarism are serious matters. The usual penalties for these offenses include failure for the assignment, failure in the course, and a written report to the Dean of Students. Plagiarism is the act of taking the ideas and/or words of others and presenting them as your own. If you are uncertain how to cite your sources, please contact the course instructor for assistance.

Americans with Disabilities Act Policy: It is the policy of your instructor to comply fully with the American with Disabilities Act and to make reasonable accommodations for qualified students with disabilities. Please present your written request for accommodation at the start of the semester.

Syllabus Not A Contract: The University attorney advises faculty members to notify students that the syllabus is not a contract and is therefore subject to change. We will try to adhere to the schedule provided, but it is important to note that changes may be necessary to meet unforeseen needs and events.

Diversity Statement: The Department of Sociology and Applied Gerontology at the University of North Texas prepares students to serve populations with diverse socioeconomic and educational experiences. The academic curriculum is designed to provide an environment in which students can develop the skills and attitudes essential to working with people from a wide range of backgrounds.

Assignment Submission Instructions: Quizzes are due on the dates that they are listed as due in the course timeline and may not be submitted after their due date. The final examination is due and must be submitted on December 8, 2011. Any exam submitted after its due date will result in up to one grade level penalty for each 24 hours late. Any exceptions would be at the sole discretion of the instructor and would require documentation of a severe emergency.

Participation: To gain class participation points students must engage themselves as directed in open discussions on the Discussion Board. This participation counts as attendance in the class and students not participating will be dropped from the course.

Advising: Students seeking advisement or consultation should meet with the instructor after class to schedule an office appointment. Requests for appointments also can be made by phone or email.

COURSE TIMELINE:

Week One Assignments:

Read textbook Part One – Introduction to Geriatric Care Management.

Study the Following Assessment Tools and Review the Associated Videos Indicated Below:

General Screening Recommendations for Chronic Disease and Risk Factors in Older Adults – Chronic diseases disproportionately affect older adults and are associated with disability and diminished quality of life.

Fulmer SPICES: An Overall Assessment Tool for Older Adults - Flagging conditions for further assessment allows the care manager to implement preventative and therapeutic interventions

Please view the related video. 20:48

Immunizations for Older Adults – Pneumonia and influenza affect older adults who have higher incidence of co-morbidities and are at higher risk for complications.

The Mini Nutritional Assessment – Can identify malnutrition in older adults before changes in biochemistry or weight are evidenced. **Please view the related video. 34:24**

The Kayser-Jones Brief Oral Health Status Examination – There is a profound association between oral health and systemic disease and health outcomes.

The Hospital Admission Risk Profile (HARP) - Functional decline in older adults is often linked to acute hospital admissions and can have devastating consequences such as increased morbidity and mortality and may result in institutionalization. **Please view the related video. 43:48**

The Transitional Care Model (TCM): Hospital Discharge Screening Criteria for High Risk Older Adults – Poorly managed transitions from hospital to home or other care setting result in higher incidence of hospital readmissions.

Please read and discuss the following articles on the Discussion Board:

- Margaret A. Weston "Case management in long-term care: challenges, changes, and opportunities". MedSurg Nursing. FindArticles.com. 05 Jun, 2011.

http://findarticles.com/p/articles/mi_m0FSS/is_n1_v6/ai_n18607261/

- Texas Health and Human Services Commission. **Texas Case Management Optimization Best Practices and Emerging Trends in Case Management.**

<http://search.yahoo.com/search?fr=mcafee&p=Texas+Case+Management+OptimizationBest+Practice+and+Emerging+Trends+in+Case+Management>

Week Two Assignments:

Read textbook Part Two – Geriatric Assessment Planning, and Care Monitoring.

Study the Following Assessment Tools and Review the Associated Videos Indicated Below:

Hendrich II Fall Risk Model – Used in clinical practice to identify eight independent risk factors associated with higher incidence of falls. **Please view the related video. 34:23**

The Falls Efficacy Scale-International (FES-I) - Fear of falling may cause curtailment of activities, leading to reduced mobility and physical fitness, and increasing risk of falling and injury.

Get Up and Go Test - Observes the patient's movements for any deviation from a confident, normal performance,

Please read and discuss the following articles on the Discussion Board:

- Andrew E. Scharlach, Nancy Giunta, Kelly Mills -Dick. Case Management in Long-Term Care Integration: An Overview of Current Programs and Evaluations. University of California, Berkeley Center for the Advanced Study of Aging Services. November 2001.

Week Three Assignments:

Read textbook Part Three – The Business of Geriatric Care Management

Study the Following Assessment Tools and Review the Associated Videos Indicated Below:

Katz Index of Independence in Activities of Daily Living – This assessment can help detect subtle changes in health and prevent functional decline. **Please view the related video. 28:23**

Lawton Instrumental Activities of Daily Living Scale - Reduced mobility and other factors may rapidly decrease an older patient's ability to perform activities crucial for independent living.

Please view the related video. 40:34

Transient Urinary Incontinence Test – Urinary incontinence is associated with an increased risk of institutionalization, as well as with urinary tract infections and depression.

Please read and discuss the following articles on the Discussion Board:

- Robyn Stone. Long-Term Care for the Elderly with Disabilities: Current Policy, Emerging Trends, and Implications for the Twenty-First Century. 2000.

Week Four Assignments:

Read textbook Part Four – Clinical Issues

Study the Following Assessment Tools and Review the Associated Videos Indicated Below:

Elder Mistreatment Assessment – The mistreatment of older adults can take many forms, including abuse, neglect, financial exploitation, and abandonment. Care managers are required to report suspected cases of abuse, neglect, financial exploitation, and abandonment to adult protective service agencies. **Please view the related video. 39:19**

Lubben Social Network Scale – Used in assessing the social networks of persons ages 65+.

Brief Evaluation of Executive Dysfunction – The detection of executive dysfunction is essential to helping a patient remain as safe and independent as possible. **Please view the related video. 36:46**

Geriatric Depression Scale – Five to seven minute screening for depression in older adults.

Please view the related video. 27:42

Mini Cog – An easy tool for assessing cognitive impairment in older adults. Persons at risk for cognitive impairment may also be at risk for delirium, falls, dehydration, inadequate nutrition, untreated pain, and medication related problems. **Please view the related video. 30:52**

Wandering in Older Adults with Dementia - People who have dementia are at risk for wandering away from the safety of the care setting and becoming lost in the community.

Please read and discuss the following articles on the Discussion Board:

- GAO. Long-Term Care Case Management: State Experiences and Implications for Federal Policy. Report to the U.S. House of Representatives. 1993.